

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		21	12/23/00
<b>FORMALITY REVIEW</b>	<i>PER</i> <i>M.H</i>	TC 9002	01-12-01
<b>RESPONSE FORMALITY REVIEW</b>		675	05-25-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	1	1	4/2/02
2	2	2	6/1/02
3	3	3	7/1/02
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Claim	Final	Original	Date
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**BEST AVAILABLE COPY** If more than 150 claims or 10 actions  
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